

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 FEB -4 PM 12:01  
Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Farmers Mutual Hail Insurance Company of Iowa  
Political Action Committee

ADDRESS (number and street)

6785 Westown Parkway

☐ Check if different  
than previously  
reported. (ACC)

West Des Moines IA 50266-7727

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00117614

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☒ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

MM / DD / YYYY

in the  
State of

State

(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the  
State of

State

5. Covering Period

MM / DD / YYYY  
07 / 01 / 2015

through

MM / DD / YYYY  
12 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Scott McEntee

Signature of Treasurer



Date

MM / DD / YYYY  
12 / 31 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

20160204 000047471

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
12 / 31 / 2015

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand

January 1,

YYYY  
2015

4663843

(b) Cash on Hand at

Beginning of Reporting Period.....

4897067

(c) Total Receipts (from Line 19) .....

754138

1503862

(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines

6(a) and 6(c) for Column B) .....

5651205

6167705

7. Total Disbursements (from Line 31) .....

800000

1316500

8. Cash on Hand at Close of

Reporting Period

(subtract Line 7 from Line 6(d)) .....

4851205

4851205

9. Debts and Obligations Owed TO

the Committee (Itemize all on

Schedule C and/or Schedule D) .....

10. Debts and Obligations Owed BY

the Committee (Itemize all on

Schedule C and/or Schedule D) .....



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
12 / 31 / 2015

## **I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

### 11. Contributions (other than loans) From:

#### (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5 2 9 2 4 0

1 0 3 1 6 6 7

(ii) Unitemized.....

2 2 4 8 9 8

4 7 2 1 9 5

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

7 5 4 1 3 8

1 5 0 3 8 6 2

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

7 5 4 1 3 8

1 5 0 3 8 6 2

### 12. Transfers From Affiliated/Other

Party Committees.....

### 13. All Loans Received.....

### 14. Loan Repayments Received.....

### 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

### 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

### 17. Other Federal Receipts

(Dividends, Interest, etc.).....

### 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

### 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

7 5 4 1 3 8

1 5 0 3 8 6 2

### 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

7 5 4 1 3 8

1 5 0 3 8 6 2

## Page 4

FEC Form 3X (Rev. 02/2003)

Page 4

**COLUMN B**  
**Calendar Year-to-Date**

- 
- This image shows a vertical strip of a document, likely a page from a book or a document with a repeating pattern. The strip contains several horizontal lines, each with a small, illegible text fragment. The fragments appear to be parts of a larger text, possibly a list or a table. The text is too small and blurry to be read accurately.

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7 5 4 1 3 8	1 5 0 3 8 6 2
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶		6 5 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ▶		6 5 0 0

201602040300047475

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rutledge, Ronald P.

Mailing Address

240 Linden Drive

City

Waukee

State

Iowa

Zip Code

50263

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

President FMH

Receipt For:

☐

Primary

☒

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 1 3 7 6

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Amount of Each Receipt this Period

5 0 6 8 8

Full Name (Last, First, Middle Initial)

B. Ronald Goldsmith

Mailing Address

4175 Lake Ridge Drive

City

Big Lake, MN 55309

State

MN

Zip Code

55309

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Regional Claims Manager

Receipt For:

☐

Primary

☒

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2 4 9 1 2

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Amount of Each Receipt this Period

1 6 6 0 8

Full Name (Last, First, Middle Initial)

C. Rutledge, Shannon

Mailing Address

2273 NE 88th Street

City

Altoona, Iowa 50009

State

Iowa

Zip Code

50009

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

SVP FMH

Receipt For:

☐

Primary

☒

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

6 8 2 8 0

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Amount of Each Receipt this Period

3 4 1 4 0

SUBTOTAL of Receipts This Page (optional) ▶

1 0 1 4 3 6

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

A. Full Name (Last, First, Middle Initial) Faga, Patrick

Mailing Address

735 Roosevelt Street

City

State

Zip Code

Story City, Iowa 50248

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

SVP FMH

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6 0 2 6 4

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

3 0 1 3 2

B. Full Name (Last, First, Middle Initial) Ladehoff, Debbie

Mailing Address

2676 Brookview LN

City

State

Zip Code

Van Metter, IA 50261

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

VP/Asst Secretary

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3 0 0 0 0

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial) Johnson, Kevin

Mailing Address

1783 Maple Ct

City

State

Zip Code

Winterset, IA. 50273

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

SVP Sales

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4 8 4 8 8

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

2 6 4 4 8

SUBTOTAL of Receipts This Page (optional)..... ▶

5 6 5 8 0

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE **3** OF 11  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Ewart, Larry

Mailing Address

15188 Bryn Mawr

City

State

Zip Code

Clive, IA. 50325

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

VP Claims

Receipt For:

☐ Primary  
☐ Other (specify) 3

☒ General

Aggregate Year-to-Date ▼

4 7 8 8 0

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Amount of Each Receipt this Period

2 3 9 4 0

**B.** Full Name (Last, First, Middle Initial) Krohn, Grant E.

Mailing Address

26818 N Avenue

City

State

Zip Code

Adel, IA 50003

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Asst VP Quality Control

Receipt For:

☐ Primary  
☐ Other (specify) 3

☒ General

Aggregate Year-to-Date ▼

4 3 2 0 0

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Amount of Each Receipt this Period

2 1 6 0 0

**C.** Full Name (Last, First, Middle Initial) Liljedahl, Ken

Mailing Address

8935 Lyndhurst

City

State

Zip Code

Johnston, IA 50131

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

VP Operations

Receipt For:

☐ Primary  
☐ Other (specify) 3

☒ General

Aggregate Year-to-Date ▼

3 6 9 6 0

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Amount of Each Receipt this Period

1 8 4 8 0

SUBTOTAL of Receipts This Page (optional).....▶

6 4 0 2 0

TOTAL This Period (last page this line number only).....▶



**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial) Fischer, Steve

Date of Receipt

Payroll Deduction

Mailing Address  
603 13th St. SE

City State Zip Code  
Altoona, IA. 50009

FEC ID number of contributing  
federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

2 6 4 0 0

Name of Employer Occupation  
Farmers Mutual Hail Ins. Co. VP HR

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
5 2 8 0 0

Date of Receipt

Payroll Deduction

Full Name (Last, First, Middle Initial) Church, Lisa

Mailing Address  
813 Edgewater Drive

City State Zip Code  
Polk City, IA 50226

FEC ID number of contributing  
federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

2 5 0 0

Name of Employer Occupation  
Farmers Mutual Hail Ins. Co. R&D Analyst

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
3 2 5 0 0

Date of Receipt

Payroll Deduction

Full Name (Last, First, Middle Initial) Anderson, Cindi M

Mailing Address  
15934 Rosewood Ct

City State Zip Code  
Clive, IA 50325

FEC ID number of contributing  
federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 2 2 4 0

Name of Employer Occupation  
Farmers Mutual Hail Ins. Co. AVP Crop Ins Data Analyst

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2 4 4 8 0

SUBTOTAL of Receipts This Page (optional).....▶

4 1 1 4 0

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

William Gwin

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

1 3 5 2 4

Mailing Address

234 Pony Geer Rd

City

State

Zip Code

Rayville, LA 71269

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Adjuster

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 0 2 8 6

Full Name (Last, First, Middle Initial)

Tjeerdsma, Bryant J

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

1 4 6 7 6

Mailing Address

8855 Kingman Dr

City

State

Zip Code

West Des Moines, IA 50266

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

VP Crop Insurance Underwriter

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 9 3 5 2

Full Name (Last, First, Middle Initial)

Marion Ball

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

1 1 2 3 2

Mailing Address

13934 Buena Vista Drive

City

State

Zip Code

Urbandale, IA 50323

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Asst VP Claims

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 2 4 6 4

SUBTOTAL of Receipts This Page (optional).....▶

3 9 4 3 2

TOTAL This Period (last page this line number only).....▶

201602040308007480

**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

Dave Benes

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Mailing Address

609 Meadowlark Drive

City

State

Zip Code

Grimes, IA 50111

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 2 1 8 0

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

State Suprv Iowa

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 4 3 6 0

Full Name (Last, First, Middle Initial)

Russ Hefner

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Mailing Address

612 Cedar Cir

City

State

Zip Code

Lindsborg, KS 67456

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 2 5 4 0

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Strategic Account Manager

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 1 9 4 5

Full Name (Last, First, Middle Initial)

Alex Hirichsen

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Mailing Address

630 Williams Dr

City

State

Zip Code

Elm Creek, NE 68836

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 5 3 4 8

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Field Claims Supervisor

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 3 0 2 2

SUBTOTAL of Receipts This Page (optional)..... ▶

4 0 0 6 8

TOTAL This Period (last page this line number only)..... ▶

2016-02-04 08:11



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial) Vickie Bell

Date of Receipt

Payroll Deduction

Mailing Address  
1017 Marshall St

City State Zip Code  
DeSota, IA 50069-1053

FEC ID number of contributing federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 1 0 5 2

Name of Employer Occupation  
Farmers Mutual Hail Ins. Co. Accounting Manager I

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2 2 1 0 4

B. Full Name (Last, First, Middle Initial) Brian Knoll

Date of Receipt

Payroll Deduction

Mailing Address  
913 Board St.

City State Zip Code  
Story City, IA 50248

FEC ID number of contributing federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 1 7 1 2

Name of Employer Occupation  
Farmers Mutual Hail Ins. Co. AVP Underwriting

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2 3 4 2 4

C. Full Name (Last, First, Middle Initial) Jack Meinecke

Date of Receipt

Payroll Deduction

Mailing Address  
1503 Howard Ave

City State Zip Code  
St. Paul, NE 68873

FEC ID number of contributing federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 3 7 0 4

Name of Employer Occupation  
Farmers Mutual Hail Ins. Co. Adjuster

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2 0 5 5 6

SUBTOTAL of Receipts This Page (optional).....▶

3 6 4 6 8

TOTAL This Period (last page this line number only).....▶

2016-02-04 08:04:47 AM

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

Matt Miller

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Mailing Address

22875 Road L

City

State

Zip Code

Cloverdale, OH 45827

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 4 4 3 6

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Regional Claims Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 1 6 5 4

Full Name (Last, First, Middle Initial)

Brian Nebergall

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Mailing Address

2201 155th St.

City

State

Zip Code

Muscataine, IA 52761

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 5 4 3 2

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Regional Claims Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 3 1 4 8

Full Name (Last, First, Middle Initial)

Julie Stillman

Date of Receipt

MM / DD / YYYY  
Payroll Deduction

Mailing Address

4000 146th

City

State

Zip Code

Urbandale, IA 50323

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 0 2 6 0

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Accounting Manager I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 0 5 2 0

SUBTOTAL of Receipts This Page (optional).....▶

4 0 1 2 8

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:  
 (check only one)

PAGE 10 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

John Swallow

Date of Receipt

Payroll Deduction

Mailing Address

3708 Boulder Circle

City

State

Zip Code

West Des Moines, IA 50265

FEC ID number of contributing  
 federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 1 2 6 8

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

AVP Claims

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 2 5 3 6

Full Name (Last, First, Middle Initial)

Roy Stephenson

Date of Receipt

Payroll Deduction

Mailing Address

4913 62nd Street

City

State

Zip Code

Lubbock, TX 79414

FEC ID number of contributing  
 federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 3 4 7 6

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Adjuster

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 0 2 1 4

Full Name (Last, First, Middle Initial)

Date of Receipt

Payroll Deduction

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....▶

2 4 7 4 4

TOTAL This Period (last page this line number only).....▶

2016-02-05 08:04:55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

Jill Pfannebecker

Date of Receipt

☒ PAYROLL DEDUCTION

Mailing Address

1410 SE Rosenkranz Dr

City

State

Zip Code

Waukeee, IA. 50263

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 0 9 5 6

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Accounting Manager I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 1 9 1 2

Full Name (Last, First, Middle Initial)

Ken Ripley

Date of Receipt

☒ Payroll Deduction

Mailing Address

5326 420th Ave

City

State

Zip Code

Blue Earth, MN 56013

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 9 2 1 2

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

Strategic Account Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 8 8 1 8

Full Name (Last, First, Middle Initial)

Dave Snyder

Date of Receipt

☒ Payroll Deduction

Mailing Address

1478 West Lake Dr

City

State

Zip Code

Detroit Lakes, MN 56501

FEC ID number of contributing  
federal political committee.

C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

1 3 8 0 0

Name of Employer

Farmers Mutual Hail Ins. Co.

Occupation

District Sales Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

2 0 7 0 0

SUBTOTAL of Receipts This Page (optional).....▶

4 3 9 6 8

TOTAL This Period (last page this line number only).....▶

5 2 9 2 4 0



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 2

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Crop Insurance and Reinsurance Bureau PAC**

Date of Disbursement

Mailing Address

440 First St NW, Suite 500

MM / DD / YYYY  
07 / 27 / 2015

City

State

Zip Code

Washington, D.C. 20001

Purpose of Disbursement

Contribution

0 1 1

Amount of Each Disbursement this Period

5 0 0 0 0 0

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**B. Property Casualty Insurers PAC**

Date of Disbursement

Mailing Address

2600 South River Road

MM / DD / YYYY  
09 / 11 / 2015

City

State

Zip Code

Des Plaines, IL 60018-3286

Purpose of Disbursement

Contribution

1 1

Amount of Each Disbursement this Period

2 0 0 0 0 0

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**C. The Grassley Committee Inc.**

Date of Disbursement

Mailing Address

PO Box 1000

MM / DD / YYYY  
10 / 13 / 2015

City

State

Zip Code

Des Moines, IA 50304

Purpose of Disbursement

Contribution

0 1 1

Amount of Each Disbursement this Period

5 0 0 0 0 0

Candidate Name

Category/  
Type

Chuck Grassley

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District:

SUBTOTAL of Disbursements This Page (optional).....▶

7 5 0 0 0 0

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 2

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

A. King For Congress

Mailing Address  
1421 S Bell Avenue

City State Zip Code  
Ames, IA. 50010

Purpose of Disbursement Contribution

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President  
State: IA District: 4

Disbursement For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

0 1 1  
Category/  
Type

Date of Disbursement

1 0 / 1 3 / 2 0 1 5

Amount of Each Disbursement this Period

5 0 0 0 0

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

1 1  
Category/  
Type

Date of Disbursement

0 / /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

0 1 1  
Category/  
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

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8 0 0 0 0 0

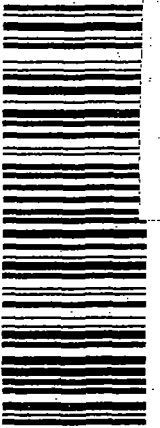
2016020400047488



ENVELOPE TO THE RIGHT  
FOLD AT DOTTED LINE  
MAIL™

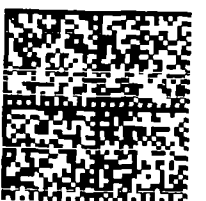


**Hail**  
Mutual  
Company of Iowa  
314 West Des Moines, Iowa 50266



7012 1640 0001 2958 0745

**CPU** U.S. POSTAGE  
PB 1P 000  
3661528  
FCMF  
MAILED  
JAN 29 2016  
50266  
**\$ 7.890**



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Washington DC 20463

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
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	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER

MP

DATE PREPARED

2/4/2016

(3/2015)

2016-02-04 03:00:47 88